



# EMPLOYEE PERSONAL DATA SHEET

Print legibly. Mark appropriate boxes D with "/" and use separate sheet if necessary.

Schedule: \_\_\_\_\_

## I. PERSONAL INFORMATION

Team Lead: \_\_\_\_\_

2. SURNAME	G E N S O N		
FIRST NAME	G E R A L Y N		
MIDDLE NAME	L A M B E R T E		
3. NAME EXTENSION (e.g. Jr., Sr.)			
4. DATE OF BIRTH (mm/dd/yyyy)	01 / 30 / 69		
5. PLACE OF BIRTH	BANTAYAN IS., CEBU		
6. SEX	D Male <input checked="" type="checkbox"/> Female		
7. CIVIL STATUS	D Single DWidowed <input checked="" type="checkbox"/> Married DSeparated DAnnulled DOthers, specify _____		
8. CITIZENSHIP	FILIPINO		
9. HEIGHT (m)	5'0"		
10. WEIGHT (kg)	175 lbs.		
11. BLOOD TYPE	O+		
12. GSIS ID NO.	NONE		
13. PAG-IBIG ID NO.	913157210858 ?		
14. PHILHEALTH NO.	120512404141		
15. SSS NO.	06-1351858-1		
16. TIN	162-617-300-000		
17. RESIDENTIAL ADDRESS	SITIO WANSYU, ALASKA, MAMBALING CEBU CITY		
18. TELEPHONE NO.	6000 (032)-2622347		
19. PERMANENT ADDRESS	SITIO WANSYU, ALASKA MAMBALING, CEBU CITY		
20. TELEPHONE NO.	6000 (032) 262-2347		
21. E-MAIL ADDRESS (if any)	geraldyn-genson@yahoo.com		
22. CELLPHONE NO. (if any)	09192061611		
23. EMPLOYEE ID NO.			

## II. FAMILY BACKGROUND

24. SPOUSE'S SURNAME	ARTURO C) Genson		DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ARTURO		
MIDDLE NAME	LUTMAR		04 / 09 / 72
OCCUPATION	BUSINESSMAN		/ /
EMPLOYER/BUS. NAME	N/A		/ /
BUSINESS ADDRESS	N/A		/ /
TELEPHONE NO.	N/A		/ /
(Continue on separate sheet if necessary)			/ /
26. FATHER'S SURNAME	LAMBERTE (DECEASED)		08 / 08 / 38
FIRST NAME	ESMERALDO		/ /
MIDDLE NAME	PRUDENTE		/ /
27. MOTHER'S MAIDEN NAME			/ /
SURNAME	JARINA (DECEASED)		04 / 14 / 39
FIRST NAME	GENOVEVA		/ /
MIDDLE NAME	DESTREZA		/ /
25. NAME OF CHILD (Write full name and list all)			/ /
KYRA MOIRA L. Genson			11 / 06 / 99
JUSTIN IVAN L. Genson			09 / 24 / 02
			/ /
			/ /
			/ /

37 a. Have you ever been formally charged? DYES  NO  
If YES, give details

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b. Have you ever been guilty of any administrative offense? DYES  NO  
If YES, give details

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38. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal? DYES  NO  
If YES, give details

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39. Have you ever been separated from the service in any following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract, AWOL or phased out, in the public or private sector? DYES  NO  
If YES, give details

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40. Have you ever been a candidate in a national or local election (except Barangay election)? DYES  NO  
If YES, give details

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41. Pursuant to: (a) Indigenouse People's Act (RA 83710); (b) Magna Carta for Disabled Persons (RA 7277); and Solo Parents Welfare Act 2000 (RA 8972), please answer the following items:

a. Are you a member of any indigenous group? DYES  NO  
If YES, give please specify: \_\_\_\_\_

b. Are differently abled? DYES  NO  
If YES, give please specify: \_\_\_\_\_

c. Are you a solo parent? DYES  NO  
If YES, give please specify: \_\_\_\_\_

42. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)

NAME	ADDRESS	TEL NO.

43. EMPLOYMENT RECORD

COMPANY NAME	POSITION	FROM	TO
CONVERGYS PHILS.	TECH SUPPORT	SEPT 20, 2017	JUNE 15, 2018
SUPPORTSAVE SOLUTIONS	CSR	JUNE 2013	JULY 2017

44. I declare under oath that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines.

I also authorize the agency head/ authorized representative to verify/ validate the contents stated herein. I trust that this information shall remain confidential.

ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)

Computer generated or xerox copy of picture is not acceptable

COMMUNITY TAX CERTIFICATE NO.
ISSUED AT
/ /
ISSUED ON (mm/dd/yyyy)

RIGHT THUMBMARK

IN CASE OF EMERGENCY:  
 Please Contact: ARTURO C. GENSOM